

SEC 1972 (6-02)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL 3235-0076

OMB Number:

Expires:

Estimated average burden hours per response.....16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	06022811
Issuance of Shares of Non-Voting Common Stock	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	D C ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Lincoln Mortgage Company	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
15 E. Ridge Pike, Suite 350, Conshohocken, PA 19428	610-832-0666
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Lending	PRESIDE
Type of Business Organization	
✓ corporation limited partnership, already formed other (p	please specify): FEO C 2 2213
Actual or Estimated Date of Incorporation or Organization: O 3 O D Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously supplent be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Fallure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

A: BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ✓ Director General and/or Managing Partner Full Name (Last name first, if individual) Sly, Jr., John L. Business or Residence Address (Number and Street, City, State, Zip Code) 15 E. Ridge Pike, Conshohocken, PA 19428 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director **Managing Partner** Full Name (Last name first, if individual) Orzechowicz, Michael A. Business or Residence Address (Number and Street, City, State, Zip Code) 15 E. Ridge Pike, Conshohocken, PA 19428 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Beneficial Owner Executive Officer General and/or Check Box(es) that Apply: Promoter Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Director General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer **Managing Partner** Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

				B. 1	NFORMAT	ION ABOL	TOFFER	NG				
		•	- 		••			.11 00			Yes	No
). Has th	e issuer soli	1, or does t							_			Z
		•			Appendix		-				_ 99	,820.00
2. What	is the minim	ium investr	nent that w	vill be acce	epted from	any individ	lua!?	***************	,	***************		
3. Does t	he offering	permit join	t ownersh	ip of a sing	gle unit?	***************	**************	**************			Yes	No Œ
4. Enter	the informat	ion reques	ted for eac	h person v	vho has be	en or will l	be paid or	given, dire	ctly or inc	irectly, any	,	_
If a per or state	ission or sim rson to be lis es, list the na er or dealer,	ted is an as ame of the b	sociated pe traker or d	erson or ag ealer. If m	ent of a bro ore than fiv	ker or deale e (5) person	r registere ns to be lis	d with the S ted are asso	SEC and/or	with a state	;	
Full Name N/A	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)				-		
Name of A	ssociated Ba	oker or De	aler				-					
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers		-				
(Check	c "All States	" or check	individual	States)	***************************************		•••••••••			**************	☐ Al	I States
AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
TL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	MM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	[WI]	WY	PR
Full Name	(Last name	first, if ind	ividual)							"		
Business o	r Residence	Address ()	Jumber an	d Street C	ity State	Zin Code)						
D13111033 0	. Residence	71001033 (7	, (a 1111001 a11	d bucci, c	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	sip code,						
Name of A	sociated Br	oker or De	aler									
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						 -
	"All States										□ Al	l States
-												
AL	AK	AZ	AR	CA KY	CO	CT	DE	DC	FL	GA	H	D O
IL MT	IN NE	IA NV	KS NH	NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
RI	SC)	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(I set name	First if indi	ividual									
Tun Name	(Dest name :	mst, ii mu	· vidual,									
Business o	r Residence	Address (?	Number an	d Street, C	ity, State,	Zip Code)						
Name of As	sociated Br	oker or De	aler									
States in W	hich Person	Listed Una	Solicited	or Intends	to Solicit	Durchasers			····			
	"All States									**************		States
AL	[AK]	AZ	[AR]	CA	CO	CT	DE	DC	FL	GA	HI	ID
II.	IN]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

COORTERINGERICE NUMBER OR INVESTORS - SEE AND USE OF PROCUEDS -

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	s 0.00	s 0.00
	Equity		s 99,820.00
	Common Preferred	<u> </u>	· ·
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		s 0.00
	Other (Specify)		
	Total		§ 99,820.00
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	- "
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors		\$ 99,820.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		. \$
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		\$
	Rule 504		\$
	Total		<u>s_0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fccs] \$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 2,000.00
	Accounting Fees		\$
	Engineering Fees		_
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$
	Total		\$ 2,000.00

	CHOO SHILLD SHIP	BER OF INVESTORS EXPENSES AND		
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adju	sted gross	\$_97,820.00
	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total opposeeds to the issuer set forth in response to Par	ny purpose is not known, furnish an esti f the payments listed must equal the adju:	mate and	
			Payments to Officers, Directors, & Affiliates	
	Salaries and fees			-
	Purchase of real estate			
	Purchase rental or leasing and installation of may	chinery		
	and equipment		[] \$	_ 🗆 \$
	Construction or leasing of plant buildings and fac	ilities	\$	🗆 \$
	Acquisition of other businesses (including the va- offering that may be used in exchange for the ass	ets or securities of another		
	issuer pursuant to a merger)		-	_
	Repayment of indebtedness			
	Working capital			
	Other (specify):		⊔3	LJ\$
				🗆 \$
	Column Totals			\$_97,820.00
	Total Payments Listed (column totals added)			97,820.00
		DEVEDERAL SIGNATURE		
gne	ssuer has duly caused this notice to be signed by the ture constitutes an undertaking by the issuer to fur oformation furnished by the issuer to any non-acc	undersigned duly authorized person. If mish to the U.S. Securities and Exchang	this notice is filed under I e Commission, upon writ	Rule 505, the following
ue	r (Print or Type)	Signature	Date	
	oln Mortgage Company	- Felly Old	Janua	44 12,20 E
m	e of Signer (Print or Type)	Title of Signer (Print or Type)	1	
hn	L. Sly, Jr.	President		

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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STÄYE-SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No Iz
	See Appendix, Column 5, for state response.		<u>ත</u>

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Lincoln Mortgage Company	- ZULLO GUE	January 12, 200 2
Name (Print or Type)	Title (Print or Type)	
John L. Sly, Jr.	President /*	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1					AT THE RESERVE	PENDIX				
State Yes No Accredited investors Amount Non-Accredited Investors Amount Yes No AL I </td <td>1</td> <td>Intend to non-a investor</td> <td>l to sell ccredited s in State</td> <td>Type of security and aggregate offering price offered in state</td> <td></td> <td>amount pu</td> <td>Finvestor and rchased in State</td> <td></td> <td colspan="2">Disqualification under State ULOE (if yes, attach explanation of waiver granted)</td>	1	Intend to non-a investor	l to sell ccredited s in State	Type of security and aggregate offering price offered in state		amount pu	Finvestor and rchased in State		Disqualification under State ULOE (if yes, attach explanation of waiver granted)	
AK	State	Yes	No		Accredited	Accredited Non-Accredited				No
AZ	AL			-				4.77.11.2.1.1 .1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		
AR	AK									
CA	AZ									
CO	AR									
CT	CA									
DE	СО									
DC	CT							_		
FL	DE									
GA	DC									
HI	FL									
ID	GA									
IL	ні									
IN	ID									
IA	IL									
KS	IN									
KY Image: control or	IA									
LA	KS									
ME	KY									
MD	LA							-		
MA	ME									
MI	MD									
MN D D D D D D D D D D D D D D D D D D D	MA									
	MI									
MS No.	MN									
	MS									

				APP	ENDI X				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 Finvestor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT							•		
NE									
NV									
NH									
NJ			Common Equity	1	\$99,820.00	0	\$0.00		
NM									
NY									
NC									
ND									
ОН									
OK						, ,			
OR									
PA									
RI									
SÇ									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					

	APPENDIX										
1		2	3		4						
	to non-a investor	I to sell eccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				lification ate ULOE , attach ation of granted) -Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											